

## HEALTHY HABITS CHALLENGE MINI-GRANT APPLICATION

Applications may be submitted and approved on an ongoing basis until  
December 1, 2009

Funds must be spent by June 30, 2010

The grant funds can be used for printing costs, nutrition education resources or supplies and healthy food promotional materials, non-food prizes (weekly and grand prize). Food can be purchased with these funds only for nutrition education purposes. ***Please type or print neatly. Attach additional pages if needed.***

Name of School \_\_\_\_\_ School District \_\_\_\_\_

Address/City/State/Zip \_\_\_\_\_

School Phone \_\_\_\_\_ School Fax \_\_\_\_\_ Email \_\_\_\_\_

Grade levels served by your school \_\_\_\_\_

Contact Person for Grant \_\_\_\_\_ Telephone \_\_\_\_\_

Email \_\_\_\_\_

Summer Telephone \_\_\_\_\_ Summer E-mail \_\_\_\_\_

1. Is your school already a Team Nutrition School (TNS)? Yes \_\_\_\_ No \_\_\_\_ if No please list the date \_\_\_\_\_, the TNS application was submitted to USDA. Include a copy of the completed enrollment application form with grant application. (5 points)
2. Target audience (for example students, school staff, parents)  
\_\_\_\_\_
3. Estimated number of people (students, parents, families) the project will impact (based on your target audience)
4. List any partners collaborating on the project: (list name of partner(s); Involvement of multiple stakeholders such as students, teachers, administrators, food service, nurse, parents and community members is encouraged.) (10 points)

5. **Project Plan (Questions 5, and 6): 45 points** (How will the Healthy Habits Challenge be implemented in your school? See Attachment B Healthy Habits Challenge Overview for tips on answering this question.

**A. When will the Challenge program start?**

**B. How long will the Challenge program run?**

**C. Which population(s) will you target** (for example which grade levels are eligible? Will school staff and parents be asked to participate)?

**D. How will you recruit participants** (for example: in health class, through morning announcements, posters, school newsletters)?

**E. How will you motivate participation** (for example: have classes challenge each other for a grand prize; have students compete against each other for weekly prize or a, grand prize, etc)?

**F. Desired Outcome(s):** (What are the goals of this project? How many participants will be recruited for this project? How will they benefit from participating in the program?)

6. **Evaluation Plan:** (How will the effectiveness -outcome(s) - of the program be measured? Number of participants, long-term adoption of healthy habits? See Attachment B Healthy Habits Challenge Overview for additional tips)
7. **Will your school continue the Healthy Habits Challenge program after the grant period is over? If so, how will it be sustained? (10 points)**
8. **How is the project linked to your school district's wellness policy? (5 points)**
9. **Please indicate the amount of the mini-grant requested (check box). Please read Attachment D (Estimated Costs) and complete Attachment D (Budget Detail form): before answering this question. (25 points)**
- ☐ \$100
  - ☐ \$250
  - ☐ \$500
  - ☐ Other\_\_\_\_\_ (maximum \$500 per school year)

I verify that the funds from this mini-grant will be used specifically to fund the *Healthy Habits Grant* as detailed above. I understand that mini-grant funds need to be spent by June 30, 2010 and that a short follow-up report will be due by August 31, 2010.

\_\_\_\_\_  
Principal Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Project Contact Signature

\_\_\_\_\_  
Date

Your school's tax ID# \_\_\_\_\_  
(The grant award check will be made payable to the school.)

***Healthy Habits Grants will be funded with monies from a 2008-10 USDA Team Nutrition Grant to the Montana Office of Public Instruction.***

***Applications may be submitted on an ongoing basis until December 1, 2009 or until all funds are distributed. Grants will be funded on a first-come first-serve basis until all funds are exhausted.***

Applications will be accepted via mail, fax, or e-mail. Mail applications to:  
Katie Bark at the address listed below. Please fax applications to 406-944-7300 and e-mail applications to. [kbark@mt.gov](mailto:kbark@mt.gov). If submitting the grant by fax or electronically, please call us to verify that it was received.

Sincerely,

Katie Bark  
Montana Team Nutrition Program  
Montana State University  
PO Box 173360, 202 Romney Hall  
Bozeman, MT 59717-3360

E-mail: [kbark@mt.gov](mailto:kbark@mt.gov)  
Telephone: (406) 994-5641  
Fax: (406) 994-7300

## **ATTACHMENT A -- Team Nutrition School Enrollment Form**

Becoming a Team Nutrition School will help you focus attention on the important role nutritious school meals, nutrition education and a health-promoting school environment play in helping students learn to enjoy healthy eating and physical activity. It will also provide the framework for team efforts by school nutrition staff, teachers, parents, the media and other community members.

### **Team Nutrition has three behavior focused strategies:**

- Provide training and technical assistance to Child Nutrition foodservice professionals to enable them to prepare and serve nutritious, appealing meals to students.
- Promote nutrition curriculum and education in schools through multiple communication channels to reinforce positive nutrition messages and encourage students to make healthy food and physical activity choices as part of a healthy lifestyle.
- Build school and community support for creating healthy school environments that are conducive to healthy eating and physical activity.

All program materials encourage students to make food and physical activity choices for a healthy lifestyle. They focus on five behavior outcomes:

- Eat a variety of foods
- Eat more fruits, vegetables and grains
- Eat lower fat foods more often
- Increase intake of calcium-rich foods
- Be physically active

### **Team Nutrition Schools have these common values:**

- We believe that children should be empowered to make food and physical activity choices that reflect the Dietary Guidelines for Americans.
- We believe that good nutrition and physical activity are essential to children's health and educational success.
- We believe that school meals that meet the Dietary Guidelines for Americans should taste good and appeal to children.
- We believe our programs must build upon the best science, education, communication and technical resources available.
- We believe that school, parent and community teamwork is essential to encouraging children to make food and physical activity choices for a healthy lifestyle.
- We believe that messages to children should be age appropriate and delivered in language they speak, through media they use, in ways that are entertaining and actively involve them in learning.
- We believe in focusing on positive messages regarding food and physical activity choices children can make.
- We believe it is critical to stimulate and support education and action at the national, state and local levels to help children develop healthy eating and physical activity behaviors.

As a new Team Nutrition School, you will receive a resource kit (while supplies last) of materials to help you plan and carry out activities for your students and their families. Additional Team Nutrition materials can be purchased from the National Food Service Management Institute (1-800-321-3054).

**Go to USDA's Team Nutrition Program Web page at [www.teamnutrition.usda.gov](http://www.teamnutrition.usda.gov)**  
**Look under "Join the Team," print and complete the [School Enrollment Form](#), (provided as a PDF file). Fax your completed application to (703) 305-2549, or mail to: Team Nutrition, 3101 Park Center Drive, Room 632, Alexandria, VA 22302. At the same time, provide a copy of the completed enrollment form to your food service director and to the Montana Team Nutrition Program. The fax number for Montana Team Nutrition is 406-994-7300. If you have questions, call Montana Team Nutrition at 406-994-5641.**

## **ATTACHMENT B**

### **The Healthy Habits Challenge Overview**

**Purpose and Description:** The Healthy Habits Challenge is a weekly school based program that encourages students, staff and families to eat healthy and stay physically active. At the same time, it is an ideal way to engage children and their families in supporting the school wellness policy. The Healthy Habits Challenge can be organized and implemented by the school's parent association at the fall back-to-school event, or health enhancement or classroom teachers can implement the program as part of the health enhancement curriculum.

**How it works:** Each month, students bring home a weekly goal sheet. Each week, students, staff and families will be encouraged to complete the weekly Healthy Habits Challenge. An example of a weekly challenge may be "Eat an orange fruit or vegetable five days this week." Students completing the weekly challenge have their sheets verified by a parent's signature. Completed weekly challenge slips can be submitted for a weekly or monthly prize drawing that promotes physical activity. Examples of a prize may be a swim pass to the local pool or a piece of sports equipment like a Frisbee, or jump rope. As an additional motivator, some schools offer participating students the opportunity to win a grand prize, such as a bike or skateboard, at the end of the school year. Keys to success are school administration and teacher support, parent participation and buy-in, marketing and promotion of the program and weekly/monthly prizes.

The Healthy Habits Challenge is designed to be used throughout the entire school year and can easily be adapted for use at your school.

**How to measure impact:** There are simple ways to measure if this program is helping children and their families practice healthful habits. They include:

1. Monitoring the number of children and families that sign up to participate at the beginning of the year and comparing this number with the number of children who are turning in their weekly challenge sheets each week and month.
2. Surveying or interviewing –at the end of the school year-- a group of children from the school that participated in the program to determine reasons for participation and if the program helped motivate them to try new foods, practice healthy habits or be more physically active.
3. Surveying or interviewing –at the end of the school year-- a group of parents from the school that participated in the program to determine the impact on their child's and families eating and physical activity habits. Survey parents that didn't participate as well to determine ways to involve them in the future.

**For More Information:** Contact the Montana Team Nutrition Program, at Montana State University, (406) 994-5641 or by email at [kbark@mt.gov](mailto:kbark@mt.gov)

This program is supported by a 2008-2010 USDA Team Nutrition Grant awarded to the Montana Office of Public Instruction.

# **ATTACHMENT C**

## **Healthy Habits Challenge Estimated Costs**

### **Expenses:**

#### **Copying**

- # of months x # of students x cost per copy = total cost[Bozeman School District cost is \$.02 per page; cost for 550 students for 5 months was \$55.00]
- Each student receives a one-sided copy of each monthly challenge (copying could be done monthly prior to giving challenge sheet to students or could be done for entire length of program, storing copies until time to handout to students)

#### **Prizes**

\$5.00 per week possible (if giving only weekly prize)  
Some schools also give a grand prize at the end of the yearly Challenge (bike, Razor scooter, pogo stick, etc)  
Donated prizes help keep costs down  
Suggestions for weekly prizes: hula hoops, sidewalk chalk, badminton set, football, Frisbee, playground balls, kites, jump ropes, plastic bat & ball sets, tickets to sports events, etc

#### **Supplies**

- Weekly challenge slip deposit box (can make)
- Weekly challenge signs in noticeable locations to remind students & parents (can be made by students; place by gym door; by lunchroom door)
- Announcement slips so the office staff can inform students who won the weekly prize

### **Sources of funds**

Parent Organization of school  
Donations from local businesses, sports events  
Grants  
School Budget

### **Publicizing and Marketing of Program**

School newsletter (frequently)  
Parent Organization (speak to them; get information in their newsletter home)  
Classroom teacher newsletters  
Letter to editor in newspaper  
Open House at your school (have a table and information to explain program)  
Health Enhancement classes  
Lunch program (verbally, on menus, posters)

*Submitted by Christine Fisher, MS –health enhancement teacher at Emily Dickenson School (chris.fisher@bsd7.org). Information based on the Challenge when implemented in the Bozeman School District during the 2007-08 school year.*

## **ATTACHMENT D**

### **Budget Detail**

The grant funds may be used for printing/promotional costs, nutrition education resources or supplies and non-food prizes. Funds can only support food costs for nutrition education/project promotion purposes. No grant funds may be used to purchase equipment. Refer to Attachment C (Healthy Habits Challenge Estimated Costs) before completing the budget.

**Project Title** \_\_\_\_\_ **School** \_\_\_\_\_

| <b>Categories</b>   | <i>Amount (\$)</i> | <i>How Will Funds Be Used?</i> |
|---|--------------------|--------------------------------|
| Food for Nutrition Education Activities   |                    |                                |
|   |                    |                                |
|   |                    |                                |
|   |                    |                                |
| Nutrition Education Resources or Supplies                                       |                    |                                |
|   |                    |                                |
|   |                    |                                |
|   |                    |                                |
| Marketing/ Promotional<br>(poster supplies, newsletter printing, taste testing) |                    |                                |
|   |                    |                                |
| Ongoing Supplies<br>(participation forms)                                       |                    |                                |
|   |                    |                                |
| Prizes (weekly @ \$5 each and a grand prize)                                    |                    |                                |
| (prizes can not be food-related in any way)                                     |                    |                                |
|   |                    |                                |
|   |                    |                                |
| <b>Total</b>  | <b>\$</b>          |                                |

\_\_\_\_\_  
Project Contact Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Administrator Signature

\_\_\_\_\_  
Date